# SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| U / I              | 00             |  |  |
|--------------------|----------------|--|--|
| OMB NUMBER:        | 3235-0076      |  |  |
| Expires:           | April 30, 2008 |  |  |
| Estimated average  | burden         |  |  |
| hours per response | 1.00           |  |  |

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|       | Date Received |   |        |
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| Name of Offering ( check if this is ar       | amendment and name has chang          | ged, and indicate change.) |                        |  |
|--|---------------------------------------|----------------------------|------------------------|--|
| Sale of Limited Partner Interests in Updata  | Partners IV, L.P.                     |                            |                        |  |
| Filing Under (Check box(es) that apply):     | ☐ Rule 504 ☐ Rule 505                 | Rule 506 □ S               | Section 4(6) ULO       | E S  |
| Type of Filing: ☐ New Filing                 | Amendment                             |                            |                        | RECEIVED   |
|  | A. BASIC IDENTIF                      | ICATION DATA               |                        | <u> </u>   |
| 1. Enter the information requested about th  | e issuer                              |                            |                        | / OCT 0 4 2007 >/  |
| Name of Issuer ( Check if this is an am      | endment and name has changed,         | and indicate change.)      |                        |  |
| Updata Partners IV, L. P.                    | •                                     | •                          |                        |  |
| •  |                                       |                            |                        | 195  |
| Address of Executive Offices                 | (Number and Street,                   | City, State, Zip Code)     | Telephone Number (In   | ncluding Aiga Code)                                      |
| Two Freedom Square, 11955 Freedom Driv       | e, Suite 7000, Reston, VA 20190       | 0                          | (703) 736-0020         |  |
| Address of Principal Business Operations     | (Number and Street,                   | City, State, Zip Code)     | Telephone Number (In   | ncluding Area Code                                       |
| (if different from Executive Offices)        |                                       |                            |                        |  |
|  | 836                                   | 8000                       |                        |  |
| Brief Description of Business                | 1111111111111111111111111111111111111 | しためめほじ                     |                        | 4 42 0 H   |
|  | <b>41.5</b>                           |                            |                        | 4 50 00 00 00 00 00 00 00 00 00 00 00 00                 |
| Investment fund focused on private equity is | ivestments.                           | 10 2007                    |                        | 141,410,100,111,410,111,410,00,111,410,00,111,410,111,41 |
|  |                                       | •/-                        |                        | 07079255   |
|  | THO                                   | MSON /                     |                        | 01019200   |
| Type of Business Organization                | Ilmited partnership, already          | MCIAI                      |                        |  |
| □ corporation                                |                                       |                            | ther (please specify): |  |
| □ business trust                             | ☐ limited partnership, to be fo       | rmed                       |                        |  |
|  |                                       | Month Yea                  | <u></u>                |  |
|  |                                       | 0 2 0 7                    |                        |  |
| Actual or Estimated Date of Incorporation of | •                                     |                            |                        | ☐ Estimated  |
| Jurisdiction of Incorporation or Organizatio | ·                                     |                            | te:                    | 7 🕞  |
|  | CN for Canada; FN for other           | er toreign jurisdiction)   | ը                      | _ E ]  |
| ODNIDD I I MODDIOMONO                        |                                       |                            |                        |  |

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. □ Director ☑ General Partner of ☐ Beneficial Owner □ Executive Officer Check Box(es) that Apply: □ Promoter the Issuer (the "GP") Full Name (Last name first, if individual) Updata Associates IV, L.P. **Business or Residence Address** (Number and Street, City, State, Zip Code) Two Freedom Square, 11955 Freedom Drive, Suite 7000, Reston, VA 20190 □ General Partner of Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director the GP (the "GPLLC") Full Name (Last name first, if individual) NJVA IV, LLC **Business or Residence Address** (Number and Street, City, State, Zip Code) Two Freedom Square, 11955 Freedom Drive, Suite 7000, Reston, VA 20190 Check Box(es) that Apply: ☑ Promoter □ Beneficial Owner ☐ Executive Officer □ Director Member of the **GPLLC** Full Name (Last name first, if individual) Burton, John F. Business or Residence Address (Number and Street, City, State, Zip Code) Two Freedom Square, 11955 Freedom Drive, Suite 7000, Reston, VA 20190 Member of the □ Director Check Box(es) that Apply: ☑ Promoter □ Beneficial Owner □ Executive Officer GPLLC Full Name (Last name first, if individual) Erickson, Richard (Number and Street, City, State, Zip Code) **Business or Residence Address** Two Freedom Square, 11955 Freedom Drive, Suite 7000, Reston, VA 20190 □ Executive Officer Member of the Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner □ Director **GPLLC** Full Name (Last name first, if individual) Goldsmith, Barry M. Business or Residence Address (Number and Street, City, State, Zip Code) Two Freedom Square, 11955 Freedom Drive, Suite 7000, Reston, VA 20190 Member of the □ Executive Officer □ Director Check Box(es) that Apply: ☑ Promoter ■ Beneficial Owner **GPLLC** Full Name (Last name first, if individual) Meyers, Tim H. **Business or Residence Address** (Number and Street, City, State, Zip Code) Two Freedom Square, 11955 Freedom Drive, Suite 7000, Reston, VA 20190 Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner □ Executive Officer □ Director Member of the **GPLLC** Full Name (Last name first, if individual) Mullett, Conor T. **Business or Residence Address** (Number and Street, City, State, Zip Code)

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

Two Freedom Square, 11955 Freedom Drive, Suite 7000, Reston, VA 20190

|   |   |  |   | B. INF                       | ORMATIC                                 | N ABOUT            | OFFERI                                  | NG                          |   |                             |            |            |
|---|---|--|---|------------------------------|---|--------------------|---|-----------------------------|---|-----------------------------|------------|------------|
| Has the iss   | uer sold, or                                  | does the iss                               | uer intend t                              | o sell, to no                | n accredited                            | investors ir       | this offerin                            | g?                          |   |                             |            | No<br>⊠    |
|   |   | wer also in                                |   |                              |   |                    |   | •                           |   |                             |            |            |
| 2. What is the  | a minimum                                     | invectment t                               | that will be                              | accepted fro                 | om any india                            | ridual?            |   |                             |   |                             | s *        |            |
| *Subject to th  |   |  |   | accepied in                  | nn any mar                              | · Iuuai :          | *************************************** |                             |   | ••                          | Ψ          |            |
|   |   |  |   |                              |   |                    |   |                             |   | ,                           | Yes        | No         |
| 3. Does the o   | ffering pern                                  | nit joint own                              | ership of a                               | single unit?                 |   |                    |   |                             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                             | Ø          |            |
| 4. Enter the in remuneration of a broker or listed are asso Full Name (L. | for solicitat<br>dealer regis<br>ciated perso | ion of purch<br>stered with tons of such a | asers in cor<br>he SEC and<br>broker or o | nnection wit<br>Vor with a s | h sales of se<br>tate or states         | curities in the na | he offering.<br>me of the br            | If a person<br>oker or deal | to be listed<br>ler. If more            | is an associ<br>than five ( | iated pers |            |
| •   |   | •  | ,,  |                              |   |                    |   |                             |   |                             |            |            |
| Sparing Partn<br>Business or R  |   |  | ber and Str                               | eet. Citv. St                | ate. Zip Coc                            | ie)                |   |                             |   |                             | _          | -          |
| 420 Lexington   |   |  |   | ·                            | •                                       |                    |   |                             |   |                             |            |            |
| Name of Asso  |   |  |   | 10170                        |   |                    |   |                             |   |                             |            |            |
|   |   |  |   |                              |   |                    |   |                             |   |                             |            |            |
| States in White   | ch Person L                                   | isted Has So                               | dicited or In                             | ntends to So                 | licit Purchas                           | sers               |   | ·                           |   |                             |            |            |
| •   |   | r check indi                               |   |                              |   |                    |   |                             |   |                             | 🛭 /        |            |
| [AL]  | [AK]  | [AZ]                                       | [AR]                                      | [CA]                         | [CO]                                    | (CT)               | [DE]                                    | [DC]                        | [FL]                                    | [GA]                        | (HI)       | [ID]       |
| [IL]  | [IN]  | [IA]                                       | [KS]                                      | [KY]                         | [LA]                                    | (ME)               | (MD)                                    | [MA]                        | [MI]                                    | [MN]                        | [MS]       | [MO]       |
| [MT]  | [NE]  | [NV]                                       | [NH]                                      | [NJ]                         | [NM]                                    | [NY]               | [NC]                                    | [ND]                        | [OH]                                    | [OK]                        | [OR]       | [PA]       |
| [RI]  | [SC]  | [SD]                                       | [TN]                                      | [TX]                         | [UT]                                    | [VT]               | [VA]                                    | [WA]                        | [WV]                                    | (WI)                        | [WY]       | [PR]       |
| Full Name (L  | ast name fu                                   | st, if individ                             | lual)                                     |                              |   |                    |   |                             |   |                             |            |            |
|   |   |  |   |                              |   |                    |   |                             |   |                             |            |            |
| Business or R   | esidence Ac                                   | ldress (Num                                | ber and Str                               | eet, City, St                | ate, Zip Coo                            | le)                |   |                             |   |                             |            |            |
| Name of Asso  | ciated Brok                                   | er or Deale                                | <u> </u>                                  |                              |   |                    |   |                             |   |                             |            |            |
|   |   |  |   |                              |   |                    |   |                             |   |                             |            |            |
| States in Which   |   |  |   |                              |   |                    |   |                             |   |                             |            |            |
| <b>,</b>  |   | r check indi                               |   |                              |   |                    |   |                             |   |                             | 0 /        |            |
| [AL]  | [AK]  | [AZ]                                       | [AR]                                      | [CA]                         | [CO]                                    | [CT]               | [DE]                                    | [DC]                        | [FL]                                    | [GA]                        | [HI]       | [ID]       |
| [IL]  | (IN)  | [IA]                                       | [KS]                                      | [KY]                         | [LA]                                    | [ME]               | [MD]                                    | [MA]                        | [MI]                                    | [MN]                        | [MS]       | [MO]       |
| [MT]  | (NE)  | [NV]                                       | (NH)                                      | [NJ]                         | [NM]                                    | [NY]               | [NC]                                    | [ND]                        | [OH]                                    | [OK]                        | [OR]       | [PA]       |
| [RI]  | [SC]  | [SD]                                       | [TN]                                      | [TX]                         | [UT]                                    | [VT]               | [VA]                                    | [WA]                        | [WV]                                    | [WI]                        | [WY]       | [PR]       |
| Full Name (L  | ast name fir                                  | st, if individ                             | lual)                                     |                              |   |                    |   |                             |   |                             |            |            |
|   |   |  |   |                              |   |                    |   |                             |   |                             |            |            |
| Business or R   | esidence A                                    | idress (Num                                | ber and Str                               | eet, City, St                | ate, Zip Coo                            | le)                |   |                             |   |                             |            |            |
|   |   |  |   |                              |   |                    |   |                             |   |                             |            |            |
| Name of Asso  | ciated Brok                                   | er or Deale                                | Г   |                              |   |                    | ,                                       |                             |   |                             |            |            |
| States in Whit  | ch Person L                                   | isted Has So                               | olicited or In                            | ntends to So                 | licit Purchas                           | sers               | <del>_</del>                            |                             |   |                             |            | <u>-</u>   |
| (Check "  | All State" o                                  | r check indi                               |   | s)                           | *************************************** |                    |   |                             |   |                             |            | All States |
| [AL]  | [AK]  | [AZ]                                       | [AR]                                      | [CA]                         | [CO]                                    | (CT)               | (DE)                                    | (DC)                        | [FL]                                    | [GA]                        | [HI]       | [ID]       |
| [IL]  | [NI]  | [1A]                                       | [KS]                                      | (KY)                         | [LA]                                    | [ME]               | [MD]                                    | [MA]                        | [MI]                                    | [MN]                        | [MS]       | [MO]       |
| [MT]  | [NE]  | [NV]                                       | [NH]                                      | [NJ]                         | [NM]                                    | [NY]               | [NC]                                    | [ND]                        | (OH)                                    | [OK]                        | [OR]       | [PA]       |
| [RI]  | (SC)  | [SD]                                       | [TN]                                      | [TX]                         | [UT]                                    | [VT]               | [VA]                                    | [WA]                        | [WV]                                    | [WI]                        | {WY}       | [PR]       |

[PR]

[TX]

[UT]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| <ol> <li>Enter the aggregate offering price of securities included in this o<br/>already sold. Enter "0" if answer is "none" or "zero." If the transcheck this box ☐ and indicate in the columns below the amount.</li> </ol>   | nsaction is an exchange offering,   |                                      |
|---|---|--------------------------------------|
| and already exchanged.  | Agreemto  | A manual Almondo                     |
| Type of Security  | Aggregate<br>Offering Price   | Amount Already<br>Sold               |
| Debt  | \$ <u>0</u>   | \$ <u>0</u>                          |
| Equity  | \$ <u>0</u>   | \$_0                                 |
| ☐ Common ☐ P  | referred  |                                      |
| Convertible Securities (including warrants)   | \$ <u>0</u>   | \$ 0                                 |
| Partnership Interests   |   | \$ 218,813,000                       |
| Other (Specify)   |   | -                                    |
| Total   |   |                                      |
| Answer also in Appendix, Column 3,  |   |                                      |
| 2. Enter the number of accredited and non-accredited investors who offering and the aggregate dollar amounts of their purchases. For the number of persons who have purchased securities and the agon the total lines. Enter "0" if answer is "none" or "zero."   | o have purchased securities in this or offerings under Rule 504, indicate | Aggregate Dollar Amount of Purchases |
| Accredited Investors  |   | \$ 218,813,000                       |
| Non-accredited Investors  |   | \$ 0                                 |
|   |   | <b>4</b> No.                         |
| Total (for filings under Rule 504 only)   |   | \$N/A                                |
| Answer also in Appendix, Column 4,  | *   |                                      |
| <ol> <li>If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the isold by the issuer, to date, in offerings of the types indicated, in to the first sale of securities in this offering. Classify securities be</li> </ol>   | the twelve (12) months prior  |                                      |
| Type of offering  | Type of   | Dollar Amount                        |
| Rule 505  | Security  | Sold<br>\$                           |
| Regulation A  |   | \$                                   |
| Rule 504  |   | \$                                   |
| Total   |   | <u></u>                              |
| a. Furnish a statement of all expenses in connection with the iss securities in this offering. Exclude amounts relating solely The information may be given as subject to future continger is not known, furnish an estimate and check the box to the least to the l | to organization expenses of the issuer.  In the amount of an expenditure  | <del>*</del>                         |
| Transfer Agent's Fees   | E   | ] \$ <u>N/A</u>                      |
| Printing and Engraving Costs  |   | \$ 10,000                            |
| Logal Fees  | Σ   | <b>1</b> \$ 140,000                  |
| Accounting Fees   |   | 3 \$ <u>N/A</u>                      |
| Engineering Fees  |   | ) \$ <u>N/A</u>                      |
| Sales Commissions (specify finders' fees separately)  | C   | \$ N/A                               |
| Other Expenses (identify) Blue Sky Filing Fees, telecop   |   | \$ 25,000                            |
| Total   | Σ   | <b>1</b> \$ <u>175,000</u>           |

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| I and total expenses fur                                  | rnished in response to Part C - Question 4.a. This difference is the  |     |  | ; | \$ <u>224,825,000</u> |
|---|---|-----|--|---|-----------------------|
| used for each of the purpor<br>estimate and check the box | at of the adjusted gross proceeds to the issuer used or proposed to be sees shown. If the amount for any purpose is not known, furnish an x to the left of the estimate. The total of the payments listed must equal is to the issuer set forth in response to Part C - Question 4.b above. |     | Payments to<br>Officers,<br>Directors, &<br>Affiliates |   | Payments To<br>Others |
| Salaries and fees   |   | Ø   | \$_*   |   | \$_0                  |
| Purchase of real estate                                   | c   |     | \$ <u>0</u>  | o | \$_0                  |
| Purchase, rental or lea                                   | asing and installation of machinery and equipment   |     | \$ <u>0</u>  |   | \$_0                  |
| Construction or leasing                                   | ng of plant buildings and facilities  |     | \$ <u>0</u>  |   | \$_0                  |
| offering that may be u                                    | ousinesses (including the value of securities involved in this used in exchange for the assets or securities of another herger)   | Ċ   | \$ <u>0</u>  | _ | \$ <u>0</u>           |
|   | dness   |     | \$ 0   |   | \$ 0                  |
| Working Capital   |   | 0   | \$ <u>0</u>  |   | \$ <u>0</u>           |
|   | nvestment in private equity investments.  | _ 0 | \$ <u>0</u>  | X | \$_**                 |
| Column Totals   |   | Ø   | s *  | × | \$ **                 |

<sup>\*</sup> Annual Management Fee to an affiliate, amount to be paid unknown at this time.

<sup>\*\*</sup> Unknown at this time.

|  | D. FEDERAL SIGNATURE  |  |
|--|---|--|
| signature constitutes an undertaking by th | ne signed by the undersigned duly authorized person. If the issuer to furnish to the U.S. Securities and Exchange Conneccredited investor pursuant to paragraph (b)(2) of R | mmission, upon written request of its staff, the |
| Issuer (Print or Type)                     | Signature   | Pair 9-28-2007                                   |
| Updata Partners IV, L.P.                   |   | 9-28-2001  |
| Name of Signer (Print or Type)             | Title of Signer (Print or Type)   |  |
| Conor T. Mullett                           | Member of NIVA, LLC, the general partner of   | the general partner of Updata Partners IV, L.P.  |

